

LAC QUI PARLE-YELLOW BANK WATERSHED DISTRICT

Application for Permit

APPROVAL OF PERMIT IS NECESSARY BEFORE WORK CAN START

WCA Review/Exclusive for Lac qui Parle County

Courthouse, 600 6th Street #7
Madison, MN 56256

Phone: 320-598-3117
Fax: 320-598-3125

Name of Applicant(s): _____ Phone # _____

Address: _____

Name of owner if other than applicant: _____

Project Location: _____ 1/2 _____ 1/4 _____ 1/4 Section: _____ Township: _____

Check the County where work is to be done: Lac qui Parle _____ Yellow Medicine _____ Lincoln _____

Permit requested for (check one or more which pertain to the project): Seepage lines _____ Main Tile _____ Pump _____

Clean ditch _____ New ditch _____ Restore/cleanout waterway _____ Install/replace culvert _____

Other: _____

(An aerial photo must be attached with scale drawing of project, NRCS Conservation determination, and/or other data to support permit application!)

The proposed project outlets directly to: _____

1. Is the proposed project area assessed to County ditch and / or tile? Yes _____ No _____ If Yes, Cty Ditch # _____

2. Name of landowner(s) of private or shared ditch/ tile system that project outlets to: _____

At the discretion of the Watershed District managers, additional information / signatures may be required as noted in the comments and or special provisions!

Will the installation require crossing a County, State, or Township roadway or outlet into the right-of-way? No _____ Yes _____

County Engineer/Township Official Signature: _____

(If yes, Signatures of County or Township official required before work can proceed!)

Is the proposed drainage area involved in a farm program? Yes _____ No _____ Have you completed a 1026? Yes _____ No _____

Will any wetlands be affected: Yes _____ No _____ Has the proposed project area been planted by July 5th the past 8 out of 10 years? Yes _____ No _____

I hereby make application for a permit to proceed with the proposal described above and have attached all supporting maps, plans, and other information submitted with this application. The information submitted and statements made concerning this application are true and correct to the best of my knowledge. *Upon completion of the work, I will submit an as-built drawing of the project to the LQP-YB Watershed District Office.*

Signed: _____ Date: _____

Signed: _____ Date: _____

Signed: _____ Date: _____

COMMENTS AND/OR SPECIAL PROVISIONS : _____

WS Manager Signature: _____ Date: _____

Permission is granted to do work in accordance with the purposes and overall plan of the District. This permit is valid for **one year** from the date of board action. This Permit only applies to the permitting authority of the Lac qui Parle-Yellow Bank Watershed District under Minnesota 103.D. The applicant is responsible for complying with all other agencies and governmental permits and regulations, including but not limited to DNR, Corp of Engineers, NRCS, WCA, & FSA rules, permits, & regulations.